

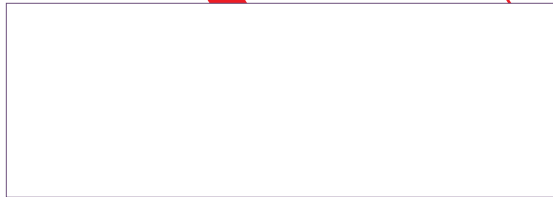
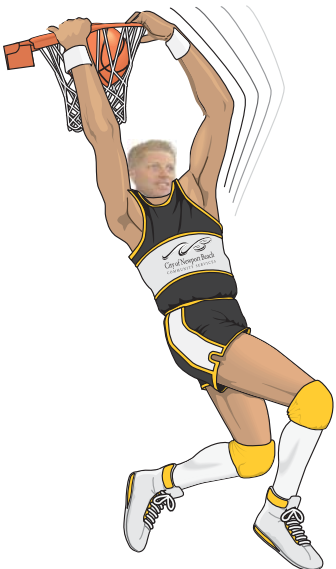
2011 WINTER BASKETBALL

Newport Beach Adult Leagues

League Begins the week of
January 3rd, 2011

Dead Line
December 2nd, 2010

City of Newport Beach
Recreation & Senior Services
PO Box 1768
3300 Newport Blvd.
Newport Beach, CA 92658-8915



If any portion of your name or address is incorrect, you received duplicate roster application or would like to be removed from our mailing list please call (949) 644-3160 or (949) 644-3151

CITY OF NEWPORT BEACH

RECREATION & SENIOR SERVICES DEPARTMENT

P.O. Box 1768, 3300 Newport Blvd., Newport Beach, CA 92658-8915

Phone 949-644-3151

www.city.newport-beach.ca.us

Fax 949-644-3155



2011 WINTER BASKETBALL



The City of Newport Beach Recreation & Senior Services Department invites your basketball team to participate in our year round program. Please read the enclosed information, and if you have any further questions please call (949) 644-3160, Fax (949) 644-3155. Web site for all League Schedules, Scores, and Standings: www.sportsstandings.com/newportbeach.

<i>SEASON</i>	<i>DEADLINE</i>	<i>BEGINS</i>	<i>ENDS</i>
<u>WINTER '11</u>	<u>December 2, 2010</u>	<u>January 3, 2010</u>	<u>March 17, 2011</u>

LEAGUE FEES

\$740.00 Per Team Regular Fee (Non-Resident Fee)

\$690.00 Per Team City of Newport Beach Resident Fee

(Form of payment MUST have a resident of Newport Beach address. No exceptions! Non-residents will be charged the regular fee on credit card charges and non-resident check customers will be billed the additional fee.) ****YOU MUST PROVIDE YOUR FULL ADDRESS ON THE APPLICATION FORM****

****PROVIDE YOUR E-MAIL ADDRESS ON THE APPLICATION, IF APPLICABLE****

**** YOU WILL RECEIVE FUTURE MAILINGS BY E-MAIL!!! ****

PLAYER COVERAGE OPTIONS

(Team may register for one of the two recommended options):

Add \$50.00 per team - Seasonal Players Medical Benefit Fund (P.M.B.F.) - The purpose of the fund is to render financial assistance to the injured player. Up to \$500.00 per player per year may be reimbursed for accidental injuries. Only an additional \$50 per team per season.

Add \$110.00 per team - Annual SCMAF Excess Medical Insurance - This option provides the following coverage to all properly registered players on the team: Accident Medical - \$25,000; Accidental Dismemberment - \$5,000; Accidental Death - \$5,000. Recommended for all teams.

Only an additional \$110 per team per calendar year.

Fees may be paid with a check payable to "City of Newport Beach" or credit card (Visa, Mastercard or American Express.)

Fees cover the cost of officials, scorekeeper, facility, league administration, web site scheduling, and awards.

LEAGUES

<u>DAY</u>	<u>DIVISIONS - TENTATIVE</u>
Monday	"CC" and "C"
Tuesday	"B" and "C"
Wednesday	"CC" and "C"
Thursday	"CC" and "C"

SITES

West Newport Comm. Ctr., Lincoln Athletic Ctr., Ensign School, Eastbluff Boys Club

NEWPORT COAST COMMUNITY CENTER—TUESDAY-CC / THURSDAY-C

GAME TIMES - 6:30, 7:30, 8:15 p.m. (8 team leagues play 6:15, 7:15, 8:00, 9:00 p.m.)

REGISTRATION

Registration is accepted on a team basis only. Division labels correspond to playing caliber of the team, with “B” the strongest, “CC” medium, and “C” the weakest. Managers will judge the skill of their team on the application and include the nights the team cannot play. The League Director will make final classification of teams.

1. **Submit a City of Newport Beach Sport League application/roster form and registration fee.**

Mail-in to the Recreation & Senior Services Department, P.O. Box 1768, Newport Beach, CA 92658; or walk-in to the Recreation & Senior Services Office, Monday through Friday, 8:00 a.m. to 5:00 p.m.

2. Teams will not be accepted without:

- a. Completion of the front and back side of the roster.
- b. Total payment of registration fee (Check or Credit Card)

3. **All players should sign and initial the roster before it is submitted.** If players are not available, then the team roster will be available to sign at the first game. Players who do not sign by the first game will not be eligible unless they are officially added with an add/drop form.

4. Teams that do not qualify for leagues will be notified by phone. Submission of roster and money does not guarantee entry into the league.

POINT SYSTEM - REGISTRATION PRIORITY

In the event there are more teams registered than available openings, the following point system will be used. Teams with the highest number of points will receive priority.

1. Three (3) points for a Newport Beach sponsor (team name) provided that team fee is paid by a check or credit card drawn from sponsor’s account. No substitutions.
2. Three (3) points for teams that have played in the City League during the past year.
3. Three (3) points for teams that have played in the City League for the past two consecutive seasons with the same sponsor in good standing.
4. Two (2) points for teams submitting typed rosters.
5. One (1) point for each player who resides in Newport Beach, Balboa Island or Corona del Mar. Do not use business address. Addresses will be checked if applicable.

UNIFORMS

1. It is required that each player has a solid color jersey with a 6 inch number on the back. A 4 inch number on the front is recommended.
2. Numbers must be permanent. Do not use tape or ink. A technical foul will be assessed on each player without the required uniform. Jerseys with no numbers will not be accepted as zero.

ROSTER AND ELIGIBILITY

1. Each team will be allowed a maximum of 12 players. A coach or manager may not play unless he/she is included on the roster.
2. A player is eligible to play for only one team in a league.
3. All players must be 18 years or older.
4. Players are responsible to have picture identification at all games in case a question of eligibility arises.
5. Eligibility protests must be made prior to the conclusion of the game.
6. No roster changes shall be allowed unless approval is given by all team managers in the division. Roster additions will be accepted only on the "Add/Drop Player Form". No more than three players may be added to the roster for the entire season.
7. No roster changes that will change the classification of a team will be allowed.

AWARDS

Each League Champion will receive individual awards and one team sponsor plaque. Champions will be decided by overall record, unless otherwise stated.

RULES

Each Manager will receive the 2010 City Basketball Rules and the National Federation of High School Association basketball rules on request. Games run two 20-minute halves, running clock.

PLAYER CONDUCT

If a player is ejected from a game for any unsportsmanlike action, he will automatically be suspended from playing in his team's next game. Should the infraction be of an extreme nature, the suspension may be extended to more than one game at the discretion of the League Director.

POLICY

The Department reserves the right to re-evaluate a team at anytime. If a team forfeits a game an additional \$25.00 may be required in order to continue league play. A team deciding to drop out of the league after the registration deadline will automatically forfeit 25% of their entry fee. After league commences and a team decides to drop from the league, they will forfeit their entire entry fee.

SPECIAL NOTE:

Faxed roster registration forms are accepted only with a recommended hard copy of the registration mailed in or walked in to the City of Newport Beach Recreation & Senior Services office. Our office is not responsible for faxed registrations that are NOT RECEIVED.

Web site for all League Schedules, Scores, and Standings:

www.sportsstandings.com/newportbeach

2011

CITY OF NEWPORT BEACH
Recreation & Senior Services
 3300 Newport Blvd, Newport Beach, CA 92663
 (949) 644-3151 Fax (949) 644-3155

Men's _____
 Women's _____
 COED _____
 P.M.B.F. _____

SPORTS APPLICATION ♦ ROSTER ♦ RELEASE OF LIABILITY AGREEMENT

BASKETBALL____ **SOFTBALL**____ **WINTER**____ **SPRING**____ **SUMMER**____ **FALL**____

TEAM NAME_____

MANAGER NAME_____ **E-MAIL:**_____ **PHONE**_____

MANAGER ADDRESS_____ **CITY**_____ **ZIP**_____

SPONSOR NAME_____ **ADDRESS**_____

SUITE_____ **CITY**_____ **ZIP**_____ **MAIL INFO TO** _____ **Sponsor**_____ **Manager**_____

READ THIS FROM BEFORE SIGNING-IF YOU SIGN THIS FORM YOU ARE GIVING UP LEGAL RIGHTS

I am aware that my participation in this sports activity may result in personal injury or other damages to others or myself. I am voluntarily participating in this sports activity with the knowledge of the danger involved and hereby agree to accept full responsibility for any and all risk of injury. In consideration of your accepting this registration, I hereby agree to fully release, indemnify and hold harmless the City of Newport Beach, the Newport-Mesa Unified School District and their officers, agents or employees from any and all liability, damage(s) claim(s) or cause(s) of action for any injury or damages resulting from or in any way arising out of my participation in the above-referenced sports program even if the injury was caused in part by the negligence of the City or School District of their employees, or by the dangerous condition of any property where the sports activities are conducted. I have carefully read this form and fully understand its contents.

My signature below indicates my acceptance and understanding of this Release of Liability.

1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____ 8. _____ 9. _____ 10. _____ 11. _____ 12. _____ 13. _____ 14. _____ 15. _____

NAME (please print)	ADDRESS	CITY	PHONE-BUS.	PHONE-RES.	SIGNATURE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12*					
13					
14					
15					

NOTE: Do NOT Sign For Your Players.

Please print their names and address. Missing Signatures will be collected at first game. Roster changes must be made on the add and drop form.

As manager of the _____ Team, I verify that all players have read the release of liability form, legally initialed and signed the form and that each signature is in fact the signature of the player. Only those individuals whose names and signature appear on this form will be permitted to participate. I represent that I am signing as an individual and as an agent of the sponsor.

Manager Signature: _____ **Date:** _____

2011**SPORTS LEAGUE APPLICATION (cont)**

TEAM NAME: _____ JERSEY COLOR: _____

TEAM MANAGER: _____ E-MAIL: _____

PHONE: _____

**** INFORMATION **MUST** BE COMPLETED** PLEASE PRINT CLEARLY******DIVISION:** "B" Strongest "C" Weakest B ____ CC ____ C ____ S-broker ____**PREFERRED NIGHT:** 1st Choice _____ 2nd Choice _____**Leagues played in most recently:**

Team Name _____ Where _____ Season/Yr _____ Div _____ Wins _____ Losses _____

Team Name _____ Where _____ Season/Yr _____ Div _____ Wins _____ Losses _____

How many other seasons have you played in the Newport Beach League? _____

List any other team names _____

YOU MUST COMPLETE ALL INFORMATION ABOVE

THE CHART BELOW IS FOR NEW BASKETBALL TEAMS ONLY

	UNI #	BASKETBALL PLAYER'S NAME	HEIGHT	AGE	EXPERIENCE IN YEARS		
					HIGH SCHOOL	JR. COLLEGE	COLLEGE
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

APPLICATION WILL NOT BE ACCEPTED UNLESS COMPLETE. I VERIFY ALL THE ABOVE INFORMATION IS CORRECT. _____

Manager's Signature (required to process)

Date

PAYMENT INFORMATION

(PLEASE PRINT CLEARLY)

Please Circle: *Resident (Newport Beach)* **\$690** *Non-Resident* **\$740**Checks made payable to "The City of Newport Beach" Check No. _____ **Only One Check Accepted**

Visa/MasterCard/American Express (circle one) Name on credit card _____

Card No. _____ Ex. Date _____

Signature: _____ Date: _____

2011

CITY OF NEWPORT BEACH
RECREATION & SENIOR SERVICES
PO BOX 1768, NEWPORT BEACH, CA 92658-8915
(949) 644-3151 Fax (949) 644-3155

Men's _____
Women's _____
COED _____
P.M.B.F. _____

RETURNING ADULT SPORTS TEAM APPLICATION

THIS FORM CAN ONLY BE USED AS A SUPPLEMENT TO A ROSTER THAT YOUR TEAM HAS SUBMITTED FOR A PREVIOUS SEASON IN THIS CALENDAR YEAR. ALL NEW PLAYER TRANSACTIONS MUST BE ENTERED ON THIS FORM

Basketball ☐ Softball ☐ Winter _____ Spring _____ Summer _____ Fall _____

TEAM NAME _____

MANAGER NAME _____ **E-MAIL:** _____ **PHONE:** _____

MANAGER ADDRESS _____ **CITY** _____ **ZIP** _____

DIVISION PREFERRED: ("B" strongest – "C" weakest) B _____ CC _____ C _____ S-broker _____

PREFERRED NIGHT: 1st choice _____ 2nd choice _____

Leagues played in most recently:

Team Name _____ Where _____ Season/Yr _____ Div _____ Wins _____ Losses _____

List any other team names _____

RELEASE OF LIABILITY FORM

READ THIS FROM BEFORE SIGNING-IF YOU SIGN THIS FORM YOU ARE GIVING UP LEGAL RIGHTS

I am aware that my participation in this sports activity may result in personal injury or other damages to myself or others. I am voluntarily participating in this sports activity with the knowledge of the danger involved and hereby agree to accept full responsibility for any and all risk of injury. In consideration of your accepting this registration, I hereby agree to fully release, indemnify and hold harmless the City of Newport Beach, the Newport-Mesa Unified School District and their officers, agents or employees from any and all liability, damage(s) claim(s) or cause(s) of action for any injury or damages resulting from or in any way arising out of my participation in the above-referenced sports program even if the injury was caused in part by the negligence of the City or School District of their employees, or by the dangerous condition of any property where the sports activities are conducted. I have carefully read this form and fully understand its contents.

My signature below indicates my acceptance and understanding of this Release of Liability.

1. _____ 2. _____ 3. _____ 4. _____ 5. _____ (IT IS MANDATORY THAT ALL NEW PLAYERS BE ENTERED HERE.)

NAME (please print)	ADDRESS	CITY	Phone-Bus.	Phone-Res.	SIGNATURE
1					
2					
3					

NOTE: Do NOT Sign For Your Players.

Please print their names and addresses. Missing Signatures will be collected at first game. Roster changes must be made on the add/drop form. As manager of the _____ Team, I verify that all players have read the release of liability form, legally initialed and signed the form and that each signature is in fact the signature of the player. Only those individuals whose names and signature appear on this form will be permitted to participate. I represent that I am signing as an individual and as an agent of the sponsor. **I VERIFY ALL THE INFORMATION ABOVE IS CORRECT.**

Manager Signature: _____ **Date:** _____

Signature required to process team application

PAYMENT INFORMATION

Please Circle: *Resident (Newport Beach)* **\$690** *Non-Resident* **\$740**

Checks made payable to "The City of Newport Beach" Check No. _____ **Only One Check Accepted**

Visa/MasterCard/American Express (circle one) Name on Credit Card _____

Account # _____ Ex. Date _____ Signature _____